· 02/16/2006 12:37 FAX '415 576 0300 TOWNSEND & TOWNSEND & CR RECEIVED **CENTRAL FAX CENTER**

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PTO/SB/22 (12-04)

Ø 003/017

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)	020375-042800US
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
Application Number 10/665,984			Filed September 19, 2003	
For HOLE	FINANCIAL PRESENTATION INSTRUMENTS WITH DER AND METHODS FOR USE	INTEGRATED		
Art Unit 2876			Examiner LEE, Diane I.	
	s a request under the provisions of 37 CFR 1.136(a) to	o extend the per	iod for filing a reply in the	above identified
The r	equested extension and fee are as follows (check time	e period desired	and enter the appropriate	e fee below):
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$_120
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
П	Applicant claims small entity status. See 37 CFR 1.27.			
	A check in the amount of the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.			
\boxtimes	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to			
	Deposit Account Number 20-1430 . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form.			
Provide credit card information and authorization on PTO-2038.				
	_			
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number 47,400				
	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34			
	Kegistiation number in acting times	37 OFK 1.34		
			February 16, 2006	
-	Signature Date			
_	Nena Bains, Reg. No. 47,400		(415) 576-0200 Telephone Number	
-	Typed or printed name		. Telephone I	Number
NOTE: one sig	Signatures of all the inventors or assignees of record of the entire intended is required, see below.	erest or their represe	entative(s) are required. Submit	multiple forms If more than
	Total of forms are submit	tted.	02/17/2006 NBINAS - 8	2000021, 201430 1066
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